PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

51092002015111s1

| | | 9 | SMALL ENTITY | | | OTHER | THAN | | | | | |
|--|--|---|----------------|-------------------------------|---------------|------------------|-----------|---------------------|------------------------|-----------|---------------------|------------------------|
| - | | | (Column 1) | | (Colur | (Column 2) | | TYPE | | OR | SMALL | |
| TOTAL CLAIMS | | | 24 | | | | | RATE | FEE | | RATE | FEE |
| FOR | | NUMBER FILED. | | NUMB | ER EXTRA | | BASIC FEE | 375.00 | OR | BASIC FEE | 750.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 0 9 Hillus 20= | | *4 | | | X\$ 9= | | OR | X\$18= | 72 |
| Ι— | EPENDENT CL | | J 11111103 0 = | | *2 | | | X42= | , | OR | X84= | 168 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +140= | | OR | +280= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 99 D |
| CLAIMS AS AMENDED - PART II | | | | | | | | · | | | OTHER THAN | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | SMALL ENTITY | | | SMALL | ENTITY |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * NTATION OF M | Minus | *** | CLAIM | = | | X42= | - - | OR | X84= | |
| ı | THOTTHESE | With the state of the | OLIN EL DEI | LIVELIV | OLANIV | | . | +140= | | OR | +280= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS | | HIGH | EST | | 1 | | ADDI- | | | ADDI- |
| | | REMAINING AFTER AMENDMENT | | PREVIO PAID | OUSLY | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | * | Minus | *** | F OL A 114 |]= | | X42= | | OR | X84= | |
| <u> </u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 1 | +140= | | 0.0 | +280= | |
| | | | | | | | | TOTAL | | OR | TOTAL | 7. |
| | | • | | | | | , | ADDIT. FEE | | OR- | ADDIT. FEE | |
| | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus 🕠 | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * NTATION OF M | Minus | *** PENDEN | T CL AIM |]= | | X42= | | OR | X84= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +14 | | | | | | | +140= | | OR | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." | | | | | | | | | | OR | TOTAL | |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |
| | The Thyliest Hull | ibor i reviously Fa | id (Total O | muepenu | ioni, is tile | mgnest numbe | 51 10U | по и ине арр | nophate box | CIII CO | iudili I. | |